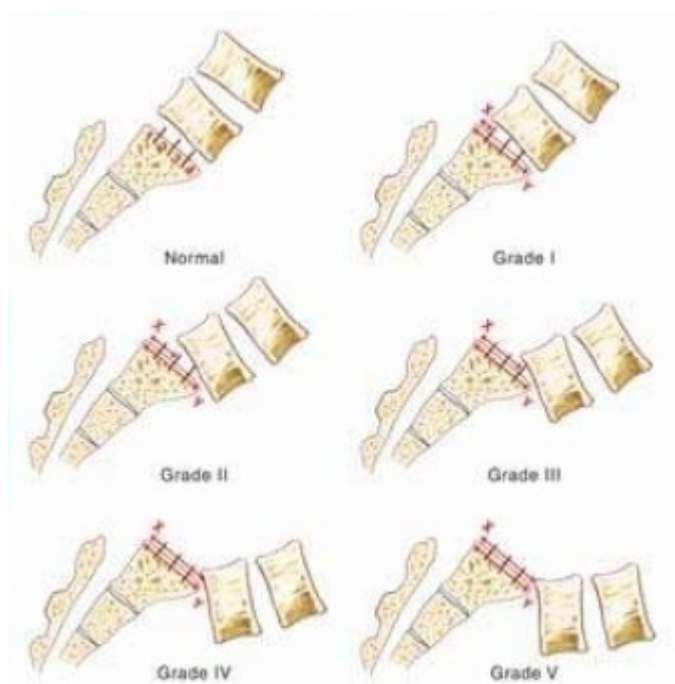


Meyerding classification

A commonly adopted method of grading [spondylolisthesis](#) is the Meyerding classification, based on the ratio of overhanging part of the superior [vertebral body](#) to anteroposterior length of the adjacent inferior vertebral body:

It divides the superior [endplate](#) of the vertebra below into 4 quarters. The grade depends on the location of the posteroinferior corner of the vertebra above.



grade I: 0-25%

grade II: 26-50%

grade III: 51-75%

grade IV: 76-100%

grade V ([spondyloptosis](#)): >100% ^{1) 2)}

The original Meyerding [classification](#) grading of [spondylolisthesis](#) of the cranial vertebra in relation to the lower vertebra does not seem to be valid for [isthmic spondylolisthesis](#) on MRI, since hypoplasia or shortening of the cranial, spondylolytic vertebra is not taken into account. Describing a finding as spondylolisthesis rather than [spondylolysis](#) is not only a question of taxonomy, but implies a more serious state of the disease. Therefore, the term “spondylolisthesis” should be reserved for patients with a real slip and not a slip mimicked by a shortened, hypoplastic vertebra ³⁾.

¹⁾

Meyerding HW. Spondylolisthesis. Surg Gynecol Obstet 1932;54:371-7

²⁾

Rothman RH, Simeone FA. The Spine. Philadelphia 1982

3)

Niggemann P, Kuchta J, Grosskurth D, Beyer HK, Hoeffler J, Delank KS. Spondylolysis and isthmic spondylolisthesis: impact of vertebral hypoplasia on the use of the Meyerding classification. Br J Radiol. 2012 Apr;85(1012):358-62. doi: 10.1259/bjr/60355971. Epub 2011 Jul 12. PubMed PMID: 21750127; PubMed Central PMCID: PMC3486675.

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